	L	110	3/14/1	ATTONITE O	OF F/L			THE OWNER OF	-01		1
	CLAINS	(Column)	PARTI	(Column 2)	7.4	SMAL TYPI	LEVIIIY	OR	OTHE	R THAN ENTITY	1
OR.	NUM	NUMBER FILED		NUMBER EXTRA		RATE	FEE	1	RATE	FEE	-
ASIC FEE							380°	OR		760.00	4
OTAL CLAIMS		50 min	us 20 =	<i>30</i>	7	x\$ =	300		Y 10 -		1
NOEPENDENT CLAIMS		7 minus 3 =		• 4		X =	_	OR	× /8=	54000	1
ULTIPLE DEPEN	DENT CLAIM PF	RESENT				+13 =	+	OR	×84:	336°	ļ
I the dillerence in co	olumn 1 is less tha	n zero, enter V	* In column 2				<u> </u>	OR	+2 0=	17.1.5]_
		A STATE OF THE STA	والمعارض والمتحارض والمتحا	, primiet (1652-1614) am meteroles (16	.j p1 \ .	:TOTAL:-		OR	TOTAL	1616	P
Medical Control	(Column 1)		(Column 2)	(Column 3)	~	EMALI	ENTITY	OR		ENTITY	
Total (independent	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
Total :	70	Minus	- 50	20		x 9 =		OR	×/8 =	360	•
Independent	. 9	Minus.	··· 7	= 2	ĺ	×39=	· V	OR	x 29=	16800	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+/30=		OR	+200=	700	
•	(Column 1)	28 00 00	expayment (Column 2)	(Column 3)	- I A	TOTAL DOIT, FEE	•			5280	
1404	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	·
Total	69	Minus	- 70	= /		x\$9=		OR	x/8=		
Independent	. 9	Minus .	··· 9	= /	-	X39=:		OR	×78=		
AFTER PREVIOUSLY EXTRA AMIENDMENT: PAID FOR Total • 69 Minus ••• 9 = Independent • 9 Minus ••• 9 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					·	+130=/		OR	+260=		
	(Column 1)	n sakali mari na •	(Column 2)	(Column 3)	, I	TOTAL DOTT. FEE		OR	TOTAL LODIT. FEE		
ľ • I	CLAIMS REMAINING AFTER WENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	•••
Total		Minus	**	=		x\$9=		OR	x\$/8=		
Independent		Minus	ėss ·	E	·	x39=		OR	×.78=		
FIRST PRESENTATION OF MULTIPLE DEPENDEN			DEPENDENT C	MAK		+130=		OR	+240=		
The entry is column 1 is less than the entry is column 2, write "0" in column 8. I we Trighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." I we Trighest Number Previously Paid For" IN THIS SPACE is less than 8, enter "2." The Trighest Number Previously Paid For" (Total or Independent) is the highest number four						TOTAL			TOTAL DOTT FEE		